

Implementing early childhood development centres in Bosnia and Herzegovina

Overview

Throughout the 2000s, early childhood development services were suboptimal in Bosnia and Herzegovina, with 90% of children not enrolled in early childhood education.¹ Furthermore, children from Roma or low-income families and children with disabilities faced disadvantages compared to peers and experienced poorer health outcomes. In response to these challenges, select municipalities designed and implemented Integrated Early Childhood Development (IECD) Centres in cooperation with the United Nations Children's Fund (UNICEF) as a means to expand services relating to early childhood

development. Services provided by IECD Centres include day-care for children, education and competency strengthening for pregnant women and caregivers relating to early childhood development, and referrals to additional services. IECD Centres employ a multidisciplinary staff and are typically co-located with other municipal services. Satellite IECD Centres and home-visit services aim to increase access for vulnerable and marginalized populations. Early user surveys conducted by UNICEF showed IECD Centres to be widely popular, with over 85% of respondents reporting satisfaction with available services. While IECD Centres are designed to assist all children, the greatest improvements

have been observed for children with disabilities who now benefit from early detection, treatment and support made available through IECD Centres. At present, municipal governments continue to support and expand IECD Centres with assistance and oversight provided by UNICEF. Although initially established at the municipal level, success of IECD Centres has since gained national attention from the Government of Federation of Bosnia and Herzegovina and Government of Republic of Srpska who have each developed and adopted intersectoral policies on early childhood development to support the initiative.

Problem definition

Throughout the early 2000s, early childhood development indicators in Bosnia and Herzegovina reported unfavourable health and social outcomes (Box 1). For example, 90% of children were not enrolled in early education and 48% of infants were reported as iron deficient.¹ Vulnerable groups, including children from Roma or low-income families and children with disabilities, were found to be at greater risk of social exclusion and poor health. For example, while indicators showed a universally low rate for under-five childhood immunizations at 68% in 2004, immunization rates among Roma children were less than 5%.²

Roma children were also at greater risk for growth stunting, which was reported to be 35% in 2010, compared to the national average of 10%.³

Box 1

What problems did the initiative seek to address?

- Low levels of early childhood education.
- Low levels of childhood immunization.
- Disparities in health and social indicators for vulnerable groups.

Health services delivery transformations

Timeline of transformations

As part of a wider initiative for the social protection of children in post-war Bosnia and Herzegovina, UNICEF began working with cantons and municipal governments in 2010 to establish Integrated Early Childhood Development (IECD) Centres. After successful piloting of Centres, UNICEF expanded the initiative to other municipalities and began gradually transitioning control over established Centres to municipal governments. Success of the model prompted national action to develop policies related to improving early childhood

development in the early 2010s and, at present, IECD Centres continue to be rolled out across the country in alignment with national policies.

Description of transformations

Selecting services. A range of early childhood development services are provided by IECD Centres which are open for drop-ins for 14 to 19 hours per day. Services complement and build on those already offered by health centres and social services to extend the continuum of care. Services offered by IECD Centres include prenatal guidance; caregiver education and competency strengthening; day-care and preschool services; detection of children at risk for developmental delays; and guidance, referrals and monitoring for families with specific social, psychological or economic needs. Services offered by IECD Centres are specifically targeted towards pregnant women, infants, children and caregivers of young children, particularly those within vulnerable populations such as Roma or low-income families or children with disabilities.

Designing care. Care pathways have been defined by international actors working on the initiative according to best available evidence. Services provided by the IECD Centres are freely accessible to the population who can choose to participate in care relevant to their needs at any time.

Organizing providers. IECD Centres are multidisciplinary and staff may include primary care providers specialized in maternal and child health and/or early childhood education, paediatricians, social workers, psychologists and nutritionists. Centres are located within other municipal buildings such as health centres, schools and community centres. As a result of sharing space with other municipal services, IECD providers are sometimes co-located with other professionals working with

similar populations, supporting interprofessional collaboration across sectors. For children identified as having needs that cannot be met within IECD Centres, IECD providers make referrals to external providers as necessary. To improve access for rural and Roma populations, satellite IECD Centres have been established and IECD providers also conduct home visits and outreach for these populations.

Managing services. IECD Centres operate from allocated spaces within existing municipal buildings. These are made available free of charge by municipal governments, avoiding the need for significant and costly investments in infrastructure. UNICEF supports the initial set-up, financing and management of IECD Centres in partnership with municipal governments. Following an introductory period of around six months, management of Centres then transitions to municipal governments who become accountable for implementing activities according to guidelines laid out in national strategic documents. Municipal governments, the Government of Federation of Bosnia and Herzegovina and the Government of Republic of Srpska continue to have reporting obligations to UNICEF, who provides ongoing support for IECD Centres. United Nations electronic database software (DevInfo) has been introduced to collect necessary information on a comprehensive range of development indicators, enabling monitoring and evaluation and supporting evidence-based policy making.

Improving performance. IECD providers have been trained to use new databases to enable monitoring and evaluation of the initiative. Additionally, ad hoc trainings are continuously offered to build professional competencies in delivering early childhood development services and increase awareness of women's and children's rights.

Engaging and empowering people, families and communities

As IECD Centres are located within municipal buildings, they are often in the heart of communities and are easily accessible by the population. However, outreach and satellite services targeted towards marginalized or vulnerable populations have been an important focus to ensure the engagement and uptake of services by those who need them most. IECD Centres aim to educate and empower pregnant women and caregivers of young children. Centres help to develop the knowledge of caregivers on topics such as early childhood development, nutrition, immunizations and children's rights. Centres also answer any questions pregnant women or caregivers may have, providing this population with easy access to important information. Users have commented that IECD Centres allow them to ask questions that other primary care providers do not have sufficient time to answer. Children are also directly engaged by the initiative via the provision of day-care services which provide a safe learning environment in which children can play and develop social skills.

Health system enabling factors

In response to early successes of the initiative observed at the municipal level, a number of national-level policies have been put in place to support further improvements in early childhood development across Bosnia and Herzegovina. In the Republic of Srpska, the government adopted the first Policy for Improving Early Childhood Development 2011–2016 with the goal of ensuring optimal conditions for healthy early childhood development for all children. The Policy was developed through coordinated efforts across ministries and has been implemented across different projects and programmes. In the Federation of Bosnia and

Table 1

How was the delivery of health services transformed through the initiative?

Before	After
Selecting services	
Absence of day-care services; services available unable to meet the complete range of needs for children and their caregivers.	IECD Centres offer a range of services designed to engage, empower and educate pregnant women, caregivers and children; day-care services available at Centres; referrals and specialized care available for children with disabilities.
Designing care	
No guidelines for delivery of early childhood development services.	Evidence-based care pathways designed by international actors for delivery of services within IECD Centres.
Organizing providers	
Providers concentrated in secondary settings; coordination between providers in delivery of child services is limited; barriers to accessing care exist for vulnerable populations.	Multidisciplinary provider teams work collaboratively within primary-level IECD Centres; IECD Centres are co-located with other municipal services allowing for cross-sector collaboration; IECD providers make referrals to other services as necessary; satellite IECD Centres and home visits help reduce access barriers for vulnerable populations.
Managing services	
Lack of day-care or preschool centres; no dedicated resources for early childhood development.	IECD Centres managed by municipal governments; international funding supports the initial costs and running of centres, as well as the introduction of electronic information systems.
Improving performance	
Absence of professional trainings relating to early childhood development and children's rights.	Ad hoc trainings relating to early childhood development provided on a continuous basis to IECD providers; IECD providers trained to use new data collection systems.

Herzegovina, the Framework Policy for Early Childhood Development of Bosnia and Herzegovina, adopted by the Council of Ministers in 2012, was developed to encourage action at the local level to improve children's environment, highlighting IECD Centres as a means to achieve this goal. The Strategic Plan for Improving Early Childhood Development in the Federation of Bosnia and Herzegovina furthered the Framework Policy and defined concrete actions and goals to be achieved by 2017. The Strategic Plan was developed with intersectoral cooperation across ministries, in

collaboration with the Public Health Institute, external experts and UNICEF.

Outcomes

Many children across Bosnia and Herzegovina now benefit from early education and development services through IECD Centres. A user satisfaction survey has provided insight into participants' views on Centres and a number of other positive outcomes have been reported as a result of the initiative (Box 2).

Box 2

What were the main outcomes of the initiative?

- A user satisfaction survey revealed the majority of respondents were satisfied with IECD Centre services (89%) and felt that services met urgent needs for both the wider community and those most in need (85%).³
- Almost two thirds of respondents (64%) reported weekly use of IECD Centre services.

- More than 1400 parents and children were enrolled in the initial four IECD Centres set up; 25% of children enrolled were identified as being at risk for developmental delay or disability.¹
- Municipal governments and IECD Centre staff report that the greatest observed benefits have been in the area of early detection and intervention for children with disabilities.

Change management

Key actors

Partnerships between international and government actors have been the driving force behind the initiative (Box 3). UNICEF led the design of the initiative, developing the model in partnership with motivated municipal governments wishing to pilot IECD Centres. While UNICEF has led the establishment of IECD Centres, many municipalities have now assumed responsibility for managing Centres to become self-sustaining. More recently, cross-sector government policies at the national level have been developed in both the Federation of Bosnia and Herzegovina and Republic of Srpska to support the initiative, reflecting a strong recognition of the need for coordinated efforts across sectors to achieve desired improvements in early childhood development.

Box 3

Who were the key actors and what were their defining roles?

- **UNICEF.** Conducted situational analysis and designed IECD Centre model; provided

initial funding and technical expertise for the establishment of IECD Centres; provides ongoing oversight for the development of IECD Centres across the country.

- **Municipal governments.** Assist in the establishment of IECD Centres; provide necessary municipal building space for Centres; incorporate Centres into municipal budgets and operations.
- **Governments of Federation of Bosnia and Herzegovina and Republic of Srpska.** Developed policies and frameworks relating to improving early childhood development.

Initiating change

Change was led by UNICEF in response to observed needs in a post-war Bosnia and Herzegovina – as evidenced by a situational analysis conducted prior to the initiative – with the view of making progress towards the Millennium Development Goals. Within a wider European Union-funded framework for promoting social protection and inclusion for children, the IECD initiative was developed in partnership with municipal

governments motivated to pilot the programme.

Implementation

Memorandums of understanding were signed with municipal authorities to ensure local ownership over IECD Centres and promote their future sustainability independent from UNICEF funds. Other stakeholders, such as health centres and local schools, were involved with implementing Centres to ensure cooperative working across sectors. IECD Centres rely on professional enthusiasm, goodwill and personal interest in increasing child development outcomes to facilitate operations as no incentives have been incorporated for providers external to the Centres.

Moving forward

UNICEF's Country Programme is due to run until 2019, ensuring a continued effort towards developing the IECD Centre model across Bosnia and Herzegovina over coming years. Many municipalities operating IECD Centres have already successfully become independent from external funding and are now financed solely through municipal budgets, indicating the capacity of the IECD model to become sustainable with continued municipal support.

Highlights

- A situational analysis supported sharpening of priorities and development of practical solutions.
- Longstanding partnerships between government actors and development agencies supported gradual capacity-building at the subnational level to enable local uptake of new roles and responsibilities relating to early childhood development.
- Aligning national policy with municipal action encouraged widespread adoption of changes, increasing consistency in approaches and securing sustainability of local efforts.

1 United Nations Children's Fund. (2013). Bosnia and Herzegovina: Early Childhood. Retrieved from http://www.unicef.org/bih/children_17680.html

2 United Nations Children's Fund. (2014). Bosnia and Herzegovina: Country Programme Document 2015-2019 (a (E/ICEF/2014/P/L.12).

3 World Health Organization. (2015). *European Health for All Database*. Retrieved from <http://data.euro.who.int/hfad/>